



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit: 1744 )  
)  
Examiner: Balsis, Shay L. )  
)  
Inventor(s): Swanepoel, Adriaan R. )  
)  
Serial No.: 09/806,807 )  
)  
Filing Date: June 25, 2001 )  
)  
For: A WINDSCREEN WIPER )  
\_\_\_\_\_ )

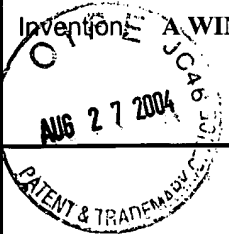
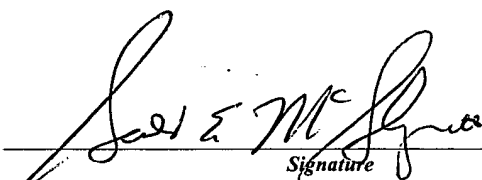

**AMENDMENT AFTER  
FINAL REJECTION  
PURSUANT TO 37 CFR 1.116**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This is in response to the Office Action dated July 1, 2004.

AI 1744 IFW

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>0182.00004</b>	
Applicant(s): <b>Swanepoel</b>					
Serial No. <b>09/806,807</b>	Filing Date <b>June 25, 2001</b>	Examiner <b>Balsis, Shay L.</b>		Group Art Unit <b>1744</b>	
Invention: <b>A WINDSCREEN WIPER</b>					
<div style="float: left; width: 20%;"></div> <div style="float: right; width: 80%;"><p style="text-align: center;"><u>TO THE COMMISSIONER FOR PATENTS:</u></p><p>Transmitted herewith is an amendment in the above-identified application.</p><p>The fee has been calculated and is transmitted as shown below.</p></div> <div style="clear: both;"></div>					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	15 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	5 -	5 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div> <div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</div> <div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div> <div><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>02-2712</b></div> <div><input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</div> <div><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div>					
 _____ <b>Gerald E. McGlynn, III</b> Reg. No. 33,737 Bliss McGlynn, P.C. 2075 West Big Beaver Road Suite 600 Troy, Michigan 48084			Dated: <b>August 25, 2004</b>		
CC:			<div>I certify that this document and fee is being deposited on <b>08/25/04</b> with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, ALEXandria, VA 22313-1450.</div> <div style="text-align: center; margin-top: 20px;"> _____ <i>Signature of Person Mailing Correspondence</i></div> <div style="text-align: center; margin-top: 10px;"><b>Megan L. Schamanek</b> _____ <i>Typed or Printed Name of Person Mailing Correspondence</i></div>		